

GARRISON COMMAND SERGEANTS MAJOR DEVELOPMENT PLAN VALIDATION

Installation Management Agency

For use of this form see IMA Regulation 600-XXX, Garrison Command Program Management

PRIVACY ACT

AUTHORITY: Title 5, U.S. Code, Section 4103, authorizes collection of this information.

PRINCIPAL PURPOSE: This information will be used by supervisors, employees, and civilian personnel officials to plan and/or schedule training, education, and other career development activities. Collection of your social security number is authorized by EO937.

ROUTINE USES: This form will be maintained in the Soldier's Military Personnel Records Jacket (MPRJ) and becomes a permanent part of the official personnel records as confirmation of enrollment, contract, obligation and agreements.

DISCLOSURE: Disclosure of the information requested is voluntary; however, applicable portion must be completed.

SECTION 1 - PERSONAL INFORMATION

1. NAME (Last, First, MI)	2. LAST 4 SSN	3. DATE ATTENDED GCSMC (YYYYMMDD)
4. DUTY LOCATION	5. WORK PHONE (COMMERCIAL/DSN)	
	6. EMAIL ADDRESS	

SECTION 2 - BRIEFINGS AND SITE VISITS

7. REGIONAL IN BRIEFS AND SITE VISITS	8. LOCATION	9. DATE COMPLETED (YYYYMMDD)

SECTION 3 - REQUIRED COURSES AND TRAINING

10. NAME OF COURSE/CONFERENCE/SYMPOSIUM	11. LOCATION	12. DATE COMPLETED (YYYYMMDD)

SECTION 4 - SUGGESTED COURSES AND TRAINING

13. NAME OF COURSE/CONFERENCE/SYMPOSIUM	14. LOCATION	15. DATE COMPLETED (YYYYMMDD)

SECTION 5 - VALIDATION

16a. SIGNATURE OF GCSM		16b. DATE SIGNED (YYYYMMDD)
17a. SIGNATURE OF GARRISON CDR		17b. DATE SIGNED (YYYYMMDD)
17c. GARRISON COMMANDER'S COMMENTS		
18a. SIGNATURE OF REGION CSM		18b. DATE SIGNED (YYYYMMDD)